## COUNTY OF MOORE NORTH CAROLINA INFORMAL BID

ISSUE DATE: April 13, 2021 **INFORMAL BID: 2021-12** 

TITLE: Housing Rehabilitation

ISSUING DEPARTMENT: COUNTY OF MOORE

Financial Services 206 S. Ray Street PO Box 905

Carthage, NC, 28327

Sealed Bids will be received until 4:30 PM Tuesday, May 4, 2021 from qualified firms for Housing Rehabilitation for the County of Moore Planning Department. A MANDATORY Pre-Bid meeting with a site visit will be held at 9:00 am Tuesday, April 27, 2021 beginning at the Moore County Planning and Transportation Facility located at 1048 Carriage Oaks Dr. Carthage, NC 28327. Due to the COVID 19 event all attendees MUST adhere to County and CDC guidelines for protective measures. Attendees must wear a face covering and maintain social distance protocol.

All inquiries for information concerning Instructions to Bidders, Bid Submission Requirements or Procurement Procedures shall be directed to (in writing):

Terra Vuncannon, Purchasing Manager 206 South Ray Street Carthage, NC 28327 (910) 947-7118

tvuncannon@moorecountync.gov

Sealed Bids shall be mailed and/or hand delivered to the Issuing Department shown above, and the envelope shall bear the name and number of this Invitation for Bids. It is the sole responsibility of the Bidder to ensure that its bid reaches the Issuing Department by the designated date and hour indicated above.

In compliance with the Invitation for Bids and to all the terms and conditions imposed herein, the undersigned offers and agrees to furnish the services and install the goods described in accordance with the attached signed bid.

| Firm Name: | Date:       |
|------------|-------------|
| Address:   | Phone:      |
|            | By:         |
|            | (typed)     |
|            | By:(signed) |

# TABLE OF CONTENTS

| INSTRUCTIONS TO BIDDERS                 | Page 3 |
|---|--------|
| BACKGROUND/SPECIFICATIONS/SCOPE OF WORK | Page 6 |
| NON-COLLUSION AFFIDAVIT                 | Page 7 |
| E-VERIFY AFFIDAVIT                      | Page 8 |
| CONTRACTOR APPLICATION                  | Page 9 |

#### INSTRUCTIONS TO BIDDERS

- 1. **Sealed Bid shall be submitted to the Issuing Department and include the enclosed Bid Form.** In order for a bid to be considered, it shall be based on the terms, conditions and specifications contained herein and shall be a complete response to this Informal Bid. The County reserves the right to make an award in whole, or in part, and to reject any and/or all bids, and to waive any informality in proposals unless otherwise specified by the Proposer. The Proposer shall sign the bid correctly and bids may be rejected if they show omissions, alterations of form, additions not called for, conditional proposals or any irregularities of any kind.
- 2. All labor costs, direct and indirect, shall have been determined and included in the proposal. The cost and availability of all equipment, materials, and supplies associated with performing the services described herein shall have been determined and included in the proposal. Sales tax should be listed separately. All price quotes shall include delivery to the delivery point, installation, and set-up charges, as necessary. Goods shall be set in place ready for owner's use. All goods shall be new and of average quality. No remanufactured, refurbished or used goods will be accepted. Appropriate product information (e.g. brochures, catalog cuts, etc.) shall be included with the proposal.
- 3. After the Informal Bid issue date, all communications between the Issuing Department and prospective Proposers shall be in writing. No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to Terra Vuncannon at the address listed on page one if this solicitation or via e-mail to tvuncannon@moorecountync.gov. All questions concerning this Informal Bid shall reference the section and page number. Questions and responses affecting the scope of goods will be provided to all prospective Bidders by issuance of an Addendum. A MANDATORY Pre-Bid meeting with a site visit will be held at 9:00 am Tuesday, April 27, 2021 beginning at the Moore County Planning and Transportation Facility located at 1048 Carriage Oaks Dr. Carthage, NC 28327. Due to the COVID 19 event all attendees MUST adhere to County and CDC guidelines for protective measures. Attendees must wear a face covering and maintain social distance protocol. All written questions shall be received by Terra Vuncannon at tvuncannon@moorecountync.gov no later than 10:00 am Wednesday, April 28, 2021. NO **EXCEPTIONS**. All addendums pertaining to this Informal Bid will be posted to the County website at <u>www.moorecountync.gov</u> within 24 – 48 business hours after the deadline for questions. It is the bidder's responsibility to check the website for the addendums.
- 4. The County will not be responsible for any oral instructions. Should a Proposer find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, s/he should at once notify the Issuing Department in writing, and a written addendum shall be issued. Acknowledgement of any Addendum received during the time of the proposal shall be noted on the Bid Form in the spaces provided. In closing of a contract, any Addendum issued shall become a part thereof. It is the Proposer's responsibility to assure that all addenda have been reviewed and, if need be, signed and returned.
- 5. Proposals will be examined promptly after opening and award will be made at the earliest possible date. The prices quoted must be held firm, and no proposals may be withdrawn until **90 days** after proposal opening date. The County reserves the right to conduct any test/inspection it may deem advisable to ensure services/materials/supplies/equipment, as appropriate, conform to

specifications.

- 6. Pursuant to North Carolina General Statutes Section 143-131, "award shall be made to the lowest responsible, responsive bid or bidders, taking into consideration quality, performance and the time specified in the proposals for the performance of the contract."
- 7. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each Proposer shall plainly set forth the warranty for the goods in the proposal. Operations and maintenance manuals for equipment shall also be provided, as appropriate.
- 8. All purchases for goods or services are subject to the availability of funds for this particular purpose.
- 9. The General Statutes of the State of North Carolina, insofar as they apply to purchasing and competitive bidding, are made a part hereof.
- 10. The County of Moore is committed to creating and maintaining an environment free from harassment and other forms of misconduct that fundamentally compromise the working environment of the County. All contractors performing work/services at a County facility shall take all necessary steps to assure that none of its employees engage in harassment or intimidation relating to personal beliefs or characteristics of anyone on the County's premises, including but not limited to, race, religion, age, color, sex, national origin or disability. Such harassment is unacceptable and will not be condoned in any form at the County of Moore. If such conduct occurs, the contractor will take all necessary steps to stop it and prevent its future occurrence. This policy shall be strictly enforced.
- 11. For all the work being performed under this Contract, the County of Moore has the right to inspect, examine, and make copies of any and all books, accounts, records, and other writing relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the vendor/contractor must make the materials to be audited available within one (1) week of the request for them.
- 12. Proposers are cautioned that this is an informal bid, not a request for contract, and the County of Moore reserves the right to reject any and/or all proposals. It further reserves the right to waive informalities insofar as it is authorized so to do where it deems it advisable in protection of the best interests of the County.
- 13. Proposals will be tabulated, evaluated and a recommendation presented to an Authorized County Representative for approval and contract execution.
- 14. Any and all exceptions to the Specifications must be stated in writing, giving complete details of what is to be furnished in lieu of requested Specifications.
- 15. The County of Moore reserves the right to cancel and terminate any resulting contract, in whole or in part, without penalty, upon forty-five (45) days' notice to the Vendor(s). Any contract cancellation shall not relieve the Vendor(s) of the obligation to deliver any outstanding services issued prior to the effective date of the cancellation.

- 16. Proposals in one (1) original and one (1) copy will be received from each Proposer in a sealed envelope or package. Please include the following information on the bid envelope: "Informal Bid 2021-12 Housing Rehabilitation". Each original shall be signed and dated by an official authorized to bind the form. Unsigned proposals will not be considered.
- 17. Upon receipt by Moore County Financial Services, your Proposal is considered a public record except for material which qualifies as "trade secret" information under N.C. Gen. Stat. 66-152 et. seq. After the Proposal opening, your Proposal may be reviewed by the County's evaluation committee, as well as other County staff and members of the general public who submit public records requests. To properly designate material as trade secret under these circumstances, each Proposer must take the following precautions: (a) any trade secrets submitted by a Proposer must be submitted in a separate, sealed envelope marked "Trade Secret Confidential and Proprietary Information Do Not Disclose Except for the Purpose of Evaluating this Proposal," and (b) the same trade secret/confidentiality designation must be stamped on each page of the trade secret materials contained in the envelope.

In submitting a Proposal, each Proposer agrees that the County may reveal any trade secret materials contained in such response to all County staff and County officials involved in the selection process, and to any outside consultant or other third parties who serve on the evaluation committee or who are hired by the County to assist in the selection process. Furthermore, each Proposer agrees to indemnify and hold harmless the County and each of its officers, employees, and agents from all costs, damages, and expenses incurred in connection with refusing to disclose any material which the Proposer has designated as a trade secret. Any Proposer that designates its entire Proposal as a trade secret may be disqualified.

18. Proposer shall comply with the North Carolina Workers' Compensation Act and shall provide for the payment of workers' compensation to its employees in the manner and to the extent required by such Act. In addition, the Provider shall maintain, at its expense, the following minimum insurance coverage:

Comprehensive General Liability coverage of \$1,000,000 per occurrence. Bodily Injury Liability of \$300,000 per occurrence; and Property Damage Liability of \$100,000 per occurrence

- 19. To the maximum extent practical, the County of Moore (the County) promotes a fair, open, and competitive procurement process as required under the North Carolina Housing Finance Agency. The County will conduct a public bid which will allow qualified contractors to provide quotes, bids or proposal for the products or services needed. Every reasonable effort will be made to receive at least three quotes, bids, or proposal.
- 20. The Urgent Repair Program is a state funded program. Contracts funded with state grants or loan funds must be procured in a manner that conforms to all applicable State and/or Local laws, policies, and standards.

#### **BACKGROUND**

The County of Moore is seeking sealed bids for the rehabilitation of three (3) substandard housing units for its 2020 Urgent Repair Program, funded by the North Carolina Housing Finance Agency. Bid opening will be public.

NOTE: BID OPENING WILL BE HELD AT 4:30 PM TUESDAY, MAY 4<sup>TH</sup> AT 206 SOUTH RAY STREET, CARTHAGE, NC 28327.

#### SPECIFICATION AND SCOPE OF WORK

- 1. Specifications for each home are provided in the itemized work description bid sheet, attached to this bid document. Questions will be addressed at the Mandatory Pre-bid/site visit.
- 2. Bids will be awarded by Moore County. The winning bidder will be required to have a preconstruction meeting with the county & homeowner in order to receive a Notice to Proceed. Construction shall not begin until a contract has been signed and a Notice to Proceed has been issued by the County or their representatives.
- 3. Moore County will use e-mail on a regular basis to share documents or pictures during the housing rehab process. Contractors signing contracts for housing rehab work will need to either have, or acquire, and maintain an active email address.
- 4. All work shall be completed in **60 working days** (unless otherwise noted), after which a \$75 penalty per working day shall be assessed.
- 5. 1-Year Warranty: The contractor is responsible for any warranty work, until it is completed to the satisfaction of the rehab inspector and the homeowner.
- 6. All change orders must be approved by Moore County.
- 7. <u>Contractors should note the following documents must be completed and included in the bid response to be considered a responsive bid:</u>
  - > Itemized work description bid sheet for each home
  - ➤ Non-Collusion Affidavit
  - > E-Verify Affidavit
  - Vendor must acknowledge all addenda
  - Contractor Application
  - Copy of NC Lead Supervisor RR&P certificate or copies of Lead Safe Trained Worker Certificates
  - **Copy of NC Renovation, Repair and Painting Firm Certification pre 1978 homes**
- 8. Moore County reserves the right to add or delete bid items.
- 9. The awarded contractor will be required to sign the URP Procurement Policy.
- 10. Contractor is required the have the following coverage and provide proof prior to contract execution.
  - a. Comprehensive General Liability coverage of \$1,000,000 per occurrence.
  - b. Bodily Injury Liability of \$300,000 per occurrence; and
  - c. Property Damage Liability of \$100,000 per occurrence
  - d. Certificate of Worker's Compensation

# NON-COLLUSION AFFIDAVIT

| State of North Carolina<br>County of Moore  |   |   |  |
|---|---|---|--|
| I   | , being   | first duly sworn, deposes and s   | ays that:  |
| He/She is thesubmitted the attached proposal;   | _of   | , th  | e proposer that has  |
| He/She is fully informed respecting the pertinent circumstances respecting such   |   | on and contents of the attached J   | proposal and of all  |
| Such proposal is genuine and is   | not a collu   | sive or sham proposal;  |  |
| Neither the said Proposer nor any of its parties of interest, including this affian directly or indirectly, with any other Proposed contract for which bidding in connection with such contract agreement or collusion or communicate the price or prices in the attached proposed element of the proposal price of any of connivance or unlawful agreement any in the proposed contract; and  The price or prices quoted in the attached conspiracy, connivance or unlawful agreement any representatives, owners, employees, or | t, has in any oposer, firm the attach ct, or has in ion or confessal or of a sher Propose advantage advantage | way colluded, conspired, common or person to submit a collusive ded proposal has been submitted an any manner, directly or indirectly of the Proposer or to fix over the or to secure through collusion against the County of Moore of fair, proper and are not tainted the part of the Proposer or any interest, including this affiant. | nived or agreed, we or sham proposal in d or to refrain from ectly, sought by , firm or person to fix head, profit or cost n, conspiracy, or any person interested by any collusion, |
|   |   | Signature and Title   |  |
| State of North Carolina   |   |   |  |
| County of Subscribed and sworn before me,   |   |   |  |
| Thisday of,   | 2021  |   |  |
| Notary Public   | <del></del>   |   |  |
| My commission expires   |   |   |  |

# **Moore County E-Verify Affidavit**

| STA    | TE OF NORTH CAROLINA<br>AFFIDAVIT   |
|--------|---|
| COU    | NTY OF MOORE  |
| I,     | (the individual attesting below), being duly authorized by and on behalf of   |
|        | (the entity bidding on project hereinafter "Employer") after first being duly sworn                                     |
| hereb  | y swears or affirms as follows:   |
| 1.     | Employer understands that E-Verify is the federal E-Verify program operated by the United States Department of          |
| Home   | eland Security and other federal agencies, or any successor or equivalent program used to verify the work authorization |
| of ne  | wly hired employees pursuant to federal law in accordance with NCGS §64-25(5).  |
| 2.     | Employer understands that Employers Must Use E-Verify. Each employer, after hiring an employee to work in the           |
| Unite  | d States, shall verify the work authorization of the employee through E-Verify in accordance with NCGS§64-26(a).        |
| 3.     | Employer is a person, business entity, or other organization that transacts business in this State and that employs 25  |
| or mo  | ore employees in this State. (mark Yes or No)   |
|        | a. YES, or  |
|        | b. NO   |
| 4.     | Employer's subcontractors comply with E-Verify, and if Employer is the winning bidder on this project Employer          |
| will e | nsure compliance with E-Verify by any subcontractors subsequently hired by Employer.                                    |
| Execu  | ated, this day of, 2021.  |
|        |   |
|        |   |
|        | ture of Affiant or Type Name:   |
| Stat   | e of North Carolina   |
|        | <b>Ⅱ</b> -  |
|        | i fix   |
| Sign   | ned and sworn to (or affirmed) before me, this the  |

Notary Public

day of \_\_\_\_\_\_, 2021.

My Commission Expires:

# **CONTRACTOR APPLICATION**

| Legal Business Name:                             |                            |              |
|--|----------------------------|--------------|
| Owner Name:                                      |                            |              |
| Ownership type (check one                        | )                          |              |
| □ Sole Proprietorship                            | □ Corporation              |              |
| Registered with North Card  ☐ Yes ☐ No           | olina Secretary of State ( | check one)   |
| Business Federal ID#:                            |                            |              |
| Year business established                        | :                          |              |
| Business mailing address:                        |                            |              |
|  |                            |              |
|  |                            |              |
| Office phone:                                    |                            |              |
| Cell phone:Fax number:                           |                            |              |
|  |                            |              |
| Email:   |                            |              |
| Diagonal all assistant                           |                            |              |
| Please check all services p  General contracting | provided by your compan    | ı <b>y</b> : |
| □ Lead paint testing                             |                            |              |
| □ Lead paint remediation                         |                            |              |
| □ Radon testing                                  |                            |              |
| □ Plumbing □ Electrical                          |                            |              |
| □ Carpentry                                      |                            |              |
| □ Moving or Storage (circle o                    |                            |              |
| □ Other services not listed he                   | ere:                       |              |
|  |                            |              |
|  |                            |              |
|  |                            |              |
|  |                            |              |

### **WORK HISTORY**

List the names, addresses and the years of construction experience of all owners, partners, stockholders and construction staff. Use additional sheet if necessary:

| Name:             | Yrs. Experience: |
|-------------------|------------------|
| Address:          |                  |
| City: State: Zip: |                  |
| Phone Number(s):  |                  |
| Name:             | Yrs. Experience: |
| Address:          |                  |
| City: State: Zip: |                  |
| Phone Number(s):  |                  |
| Name:             | Yrs. Experience: |
| Address:          |                  |
| City: State: Zip: |                  |
| Phone Number(s):  |                  |
| Name:             | Yrs. Experience: |
| Address:          |                  |
| City: State: Zip: |                  |
| Phone Number(s):  |                  |

### **WORK REFERENCES**

List three (3) job references where work has been recently completed by your firm. Please list the name, address, and telephone number of each. Give a brief description of the work completed. One (1) reference must be less than six (6) months old and one less than twelve (12) months old.

| Name:                | Phone #:     |  |
|----------------------|--------------|--|
| Address:             |              |  |
| City: State: Zip:    |              |  |
| Date Work Completed: | Permit #:    |  |
|                      |              |  |
|                      | Phone #:     |  |
|                      | 1 110110 #.: |  |
|                      |              |  |
|                      | Permit #:    |  |
|                      |              |  |
|                      |              |  |
| Name:                | Phone #:     |  |
| Address:             |              |  |
| City: State: Zip:    |              |  |
| Date Work Completed: | Permit #:    |  |
| Work Description:    |              |  |
|                      |              |  |
|                      |              |  |

#### SUPPLIERS/CREDIT HISTORY

Please list the name(s) of three (3) current Material Supplier(s): Supplier Name: Phone #: Account #: \_\_\_\_ How many years have you had credit with this supplier? \_\_\_\_\_ What has been your highest credit limit? \$\_\_\_\_\_ How would you describe your present status with the Supplier? (Check one) □ Outstanding □ Good □ Poor Supplier Name: \_\_\_\_\_ Phone #:\_\_\_\_\_ Account #: How many years have you had credit with this supplier? \_\_\_\_\_ What has been your highest credit limit? \$\_\_\_\_\_ How would you describe your present status with the Supplier? (Check one) □ Outstanding □ Good □ Poor Supplier Name: \_\_\_\_\_ Phone #:\_\_\_\_ Account #: How many years have you had credit with this supplier? What has been your highest credit limit? \$\_\_\_\_\_ How would you describe your present status with the Supplier? (Check one) □ Outstanding □ Good □ Poor Have you or your company ever failed to complete any work awarded to you? □ Yes □ No

| Have you or your company ever been removed from a roster of acceptable contractors within the past seven (7) years?  □ Yes □ No If "Yes", where, and why: |   |  |
|---|---|--|
|   | by certifies that all of the above given information is true bwledge:   |  |
| Signature of Contractor/Firm Owner  | <br>Date  |  |
| Street Address/PO Box: City, State, Zip: Date: Owner Name: Title:   |   |  |
| SIGNATURE   |   |  |
| -   | FICATION CONDUCTED  |  |
| been checked on (date) and  | Federal Procurement or Non-Procurement Programs has I the above contractor or sub-contractor has been in any NCHFA assisted projects. Signature of person |  |
| SIGNATURE   |   |  |